

Tennessee Department of Mental Health and Developmental Disabilities

Transfer *from* RMHI to FSP (Regular/Non-Emergency)

This policy was developed to provide guidelines to the staff in the office of Special Services for the transfer of a person from a regional mental health institute (RMHI) to the Forensic Services Program (FSP) at Middle Tennessee Mental Health Institute- (MTMHI)

II. Policy:

The Commissioner may authorize transfer to the Forensic Services Program (Secure Unit of MTMHI) of a patient who was admitted, committed, or hospitalized at an RMHI when:

- the person could more properly be cared for and treated in a facility other than the one in which the person is a services recipient; and
- the transfer is in the person's best interest, and
- the commissioner determines that the person is substantially likely to injure such person or others if not treated in a secure facility.

III. Scope:

This policy applies to the Department of Mental Health and Developmental Disabilities, to the Regional Mental Health Institutes (RMHI), including the Forensics Services Program (FSP).

IV. Procedure:

A. Referring RMHI:

Upon recommendation by the treatment team, the Chief Officer of the referring facility or his/her designee shall prepare and send a transfer packet to the Commissioner via the Forensic Services Program in Central Office. The transfer packet must include:

- a cover letter from the Chief Officer requesting the transfer with the rationale for the request;
- A request for transfer from a licensed physician or a licensed psychologist with a health service provider designation that includes the rationale for transfer including the patient's behavior and attempted treatment interventions (Attachment A);
- a mental assessment/evaluation completed within the last twenty four hours prior to request;
- a current risk assessment;
- a physical examination completed within the last twenty four hours prior to the request for transfer;
- a copy of the court commitment order; and
- documentation that the individual and his/her appropriate relative/conservator have been notified of the transfer request by the Chief Officer.

B. Special Services Staff

Upon receipt of the transfer request, the assigned forensic staff member in the office of Special Services will review the request and, if they concur with the request, prepare and route the following:

- a memo to the Deputy Assistant Commissioner recommending the transfer (Attachment B)
- a memo to the Assistant Commissioner from the Deputy Assistant Commissioner requesting approval (Attachment C), and
- a memo to the Commissioner from the Assistant Commissioner requesting approval for the transfer (Attachment D).

C. The Forensic Specialist will prepare letters of Authorization for transfer from the Commissioner to the following:

- the Chief Officer of the referring facility (Attachment E), along with a receipt form (Attachment K)
- the Chief Officer of MTMHI for (FSP) (Attachment F),
- the individual being transferred (Attachment G), along with a complaint form (Attachment J)
- by certified mail to the appropriate relative or conservator (Attachment H), along with a complaint form, and
- the committing court (Attachment 1)

D. Referring Chief Officer

- Upon receipt of the transfer approval, the Chief Officer or his/her designee will deliver the transfer authorization along with the complaint and receipt form to the individual being transferred.
- The Chief Officer or his/her designee will keep the signed receipt for their files and place a copy in the individual's medical record.
- The Chief Officer or his/her designee will send written notice regarding the transfer to the committing court.
- The Chief Officer or his/her designee will communicate with the Forensic Services Coordinator at FSP to arrange the transfer.
- The Chief Officer of the referring facility or his/her designee will arrange transportation of the patient/defendant for the day of transfer.

E. Forensic Services

Forensic Services staff at the receiving facility (FSP) will notify the referring facility of the admission of the referred patient/defendant .